1.0 MEDEVAC TRAINING PROGRAM INTRODUCTION

The purpose of this Policy and Procedure Manual is to promote the health and safety of the people of Alaska by establishing uniform minimum standards for medevac instructors, medevac training programs, and medevac instructor training programs. The <u>Aeromedical Evacuations in Alaska Instructor's Guide, Third Edition, Revised 1994,</u> serves as the basis for approval of instructors and courses. <u>Air Medical Crew - National Standard Curriculum</u>, developed by Samaritan Air Evac and ASHBEAMS, is also an excellent program and can be used to develop new programs. This manual is to be used as a guideline to supplement the Air Medical Services Regulation 7 AAC 26.310 - 7 AAC 26.400. (See Appendix 1)

2.0 MEDEVAC TRAINING PROGRAM PROCEDURES

2.1 Training Group Responsibilities

- a) An organization applying for approval of a medevac training program must:
 - apply to the department for approval at least 14 days before the course begins, on forms provided by the department (the department may waive the 14 day requirement); (See Appendix 2)
 - 2. ensure that appropriate training equipment will be available throughout the course:
 - 3. use a curriculum approved by the department that provides a minimum of 16 hours of instruction; and
 - 4. use department approved instructors as the primary instructor with subject matter experts as available.
- b) An organization applying for course approval for training medevac instructors must:
 - ensure that the appropriate training equipment will be available throughout the course:
 - 2. use a curriculum which prepares the student to teach the objectives of a department approved aeromedical training curricula;
 - 3. use department approved medevac instructors who have taught at least two medevac courses within the preceding two years;
 - 4. limit enrollment to individuals who are currently approved as medevac escorts;
 - 5. use other subject matter experts as needed;
 - 6. plan a minimum of six hours instruction.

3.0 POLICIES AND PROCEDURES FOR MEDEVAC TRAINING PROGRAM

3.1 Training Program Recommendations:

- a) Agencies or organizations that have been recognized by the department should conduct, at a minimum, one basic medevac course per year and/or maintain an ongoing continuing education training program.
- b) Conduct training in conformance with this policy and procedure manual and consistent with the established state medevac curriculum. (See Appendix 3)
- c) Provide and assure a process whereby all course materials and training group policies and procedures are provided to the students prior to the beginning of class instruction.
- d) Establish record keeping policies and ensure that appropriate information is available for evaluation purposes.
- e) Provide for a training course evaluation method to ensure that a uniform quality of training is maintained and establish an evaluation mechanism that will enable the student to provide feedback on the quality of the training course content and instruction.
- f) Successful completion of a Medevac Training programs is determined by the instructor, and should include passing the written examination with a score of 70% or greater.

3.2 Instructor/Coordinator Requirements

Each recognized training program must have an Instructor/Course Coordinator that meets the following qualifications:

- a) Be a licensed physician, registered nurse, Alaska State Medical Board authorized physician assistant-certified, certified Emergency Medical Technician-II or Emergency Medical Technician-III, or paramedic licensed in Alaska or currently as a National Registry of Emergency Medical Technicians/Paramedic (NREMT-P).
- b) Successfully complete a department approved medevac instructor training program.
- c) Initial approval for an applicant who completed the initial instructor training program before

 July 1 expires on December 31 of the following year, initial training completed after

 June 30 expires on December 31 of the second year following the year of issuance.
- d) All reapprovals expire on the second December 31 following the expiration of the most recent approval regardless of the date of issuance of reapproval; based on reasonable justification, the department may extend the approval of a medevac training instructor for a period of not more than 120 days after the expiration.
- e) The department will send notification to all approved medevac instructors at least 60 days in advance of the expiration date that the approval will expire if the reapproval requirements are not satisfied.
- f) Reapproval of medevac instructors is contingent upon completion of the following:
 - 1. not more than 24 months after expiration of his or her current approval, apply for reapproval in writing on a form approved by the department;

- provide evidence that he or she is a licensed physician, registered nurse, Alaska State Medical Board authorized physician assistant-certified, paramedic licensed in Alaska or currently registered as a NREMT-P, Emergency Medical Technician-III, or Emergency Medical Technician-II;
- 3. show evidence that he or she has taught more than 16 hours within the past two years in three or more medical subject areas included in the approved medevac training program.

3.3 Record Keeping

- a) Within 21 days following completion of the last day of the class, the instructor of a approved course, shall submit to the department a list of those students who successfully completed the training program.
- b) Since the department does not maintain a database of all individuals trained as medevac escorts, the course instructor should provide each student successfully completing the program with appropriate evidence of course completion, including the name of the instructor, the dates and location of the class, and the total class length, in hours.

4.0 MEDEVAC PROGRAM CURRICULUM STANDARDS

- a) Effective training should include a minimum 16 hours of instruction. (See Appendix 3)
- b) Curriculum is organized to provide the knowledge and skills required of the medevac escort and serve as an adjunct to previous training. (Students should be certified to at least the ETT level and have current CPR certification from the American Heart Association or the American Red Cross).
- c) The thrust of the training is to develop specific skills, as well as general principles of assessment and treatment, based on fundamentals of normal anatomy and physiology, and then apply these to the airborne environment and a broad spectrum of specific patient conditions.

5.0 CONTINUING EDUCATION

All medevac escorts who are used on an aeromedical service are required to provide evidence of 16 hours or more of continuing medical education every two years. This is in accordance with 7 AAC 26.370. This training will be in specialized aeromedical patient transportation topics.

6.0 ADVANCED AEROMEDICAL TRAINING

Due to varying skill levels of the students, it is recommended that licensed personnel receive training in the Advanced Aeromedical Training Curriculum based upon the National Standards. This can supplement the basic course through self-directed study or classroom participation.

6.1 Suggested Curriculum

The following are the suggested topics and minimum hours for an advanced provider course.

Category	Topic	Minimum hours
1	Flight Physiology	1
2	Patient Assessment, Preparation and Care	3
3	The Respiratory Patient	1
4	The Cardiovascular Patient	1
5	The Neurological Patient	1
6	The Orthopedic Patient	1
7	The Trauma Patient	1
8	The Burn Patient	1
9	The Patient in Shock	1
10	The Combative Patient	1
11	The High-Risk Obstetrical Patient	1
12	The High-Risk Neonatal Patient	1
13	The Pediatric Patient	<u>2</u>
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6.2 Lesson Overview

- a) Category 1: This category focuses on the major gas laws affecting physiology; use of oxygen-related equations that focus on altitude; the effects of altitude on multiple body systems; signs, symptoms, and treatment of altitude-related disease processes; the nine stresses of flight, and pressurized vs. unpressurized aircraft.
- b) Category 2: Category 2 reviews methods of patient assessment and preparation for transport, as well as inflight and post-flight care. The focus is on primary and secondary assessments used for trauma patients and head-to-toe system surveys for medical patients. An introduction of hypothermia/frostbite and treatment overview for the aeromedical patient.
- c) Category 3: This category focuses on the assessment and management of patients with common respiratory conditions during air transport. Also discusses are the specific effects of altitude and stresses of flight.
- d) Category 4: In this category the student will learn about the care of the patient with acute cardiovascular pathophysiology and the effects of the airborne environment. Also discussed are the pre-transport assessment and stabilization, as well as care en route for patients with acute myocardial infarction, congestive heart failure and aortic aneurysms.
- e) Category 5: This category looks at the neurologically injured or ill patient during aeromedical transport. It discusses pre-transport stabilization, care during transportation and considerations on the neurologically impaired patient.

- f) Category 6: Category 6 focuses on the assessment, management and care of the orthopedic patient during air transport. Also discussed are the specific effects of altitude and the stresses of flight.
- g) Category 7: In this category guidelines are given for the use of air-medical transport for the trauma patient, and specific issues are discussed relative to pre-flight stabilization and patient care en route.
- h) Category 8: This category will look at the pathophysiology of the burn injury and the initial treatment protocols when confronted with a victim of major burn injury.
- Category 9: Category 9 discusses the etiology, management and treatment of shock.
 The emphasis is on the clinical recognition and treatment of shock in the air-borne
 environment.
- j) Category 10: This category describes methods for recognizing and managing psychiatric and combative emergencies in the air-medical environment. Included are the effects of altitude on combative behavior, the psychosocial needs of the psychotic/combative patient, precipitating causes of psychosis and combativeness and the proper procedure for physically and pharmacologically restraining combative patients.
- k) Category 11: In this category the assessment and management of the high-risk obstetrical patient is discussed. Common obstetrical emergencies and treatment modalities during transport are presented.
- l) Category 12: This category provides an overview of the resuscitation, stabilization and transport management of a newborn infant in the airborne environment.
- m) Category 13: Category 13 focuses on the physical assessment of the pediatric patient and care during transport.

6.3 Other Suggested Topics

Time permitting, other suggested topics are: Prevention and Control of Infectious Conditions, Advanced Survival, Hazardous Material Scene Response, and Quality Assurance.

7.0 GROUND FOR SUSPENSION, REVOCATION, OR REFUSAL TO APPROVE A MEDEVAC TRAINING INSTRUCTOR

The department may revoke, suspend, or refuse to issue a certificate of recognition for:

- a) Fraud or deceit in obtaining the medevac instructor approval.
- b) Habitual abuse of alcoholic beverages or illegal use of a controlled substance (AS 11.71.900(4)).
- c) Violation of federal or state law pertaining to medical practice and drugs.
- d) Gross misconduct in the performance of duties as a medevac instructor.
- e) Suspense, revocation, or expiration of provider credentials by the Alaska Department of Commerce and Economic Development, the Alaska Department of Health and Social Services, or the National Registry of Emergency Medical Technicians.

8.0 COMITY

- a) The department will approve a medevac instructor, or medevac instructor trainer, who is currently approved in another state or territory if the person provides the department with the following:
 - 1. a copy of current local, state, or territorial approval as a medevac instructor, or equivalent;
 - 2. a letter of recommendation from the coordinator of his or her medevac instructor training program attesting that the individual is capable of teaching the material contained in Aeromedical Evacuation in Alaska Instructor's Guide, Revised 1985;
 - 3. Other proof of qualifications the department may require.
- b) An applicant for approval as a medevac instructor or medevac instructor trainer must provide, in addition to the requirements in a) of this section, evidence that he or she is a licensed physician, registered nurse, Alaska State Medical Board authorized physician assistant-certified, paramedic licensed in Alaska or currently registered as a NREMT-P, Emergency Medical Technician-III or Emergency Medical Technician-II.
- c) An approval granted in accordance with a) of this section will expire on the December 31 closest to the date of expiration of the out of state credentials. Following expiration, the individual must apply for reapproval as outlined in section 3.2.

9.0 DEFINITIONS

- a) "aeromedical service" means a medevac service, critical care air ambulance service, or specialty aeromedical transport team.
- b) "department" refers to Department of Health and Social Services.
- c) "hours of instruction" means hours, excluding those used for the approval testing of students, devoted to the didactic, clinical, and psychomotor training of the course participants.
- d) "National Registry Emergency Medical Technician-Paramedic" or "NREMT-P" means an individual who has obtained full paramedic approval from the National Registry of Emergency Medical Technicians.
- e) "Successful course completion" means verification by the department approved instructor, on forms provided by the department, that the student met all didactic objectives and psychomotor skill requirements within the classroom setting prior to taking the examinations for approval.